



Patent
Attorney's Docket No. 1025455-000113

IFW
2/2/07

In re Patent Application of

Deborah Kim GLENCROSS

Application No.: 10/754,711

Filing Date: January 12, 2004

Title: ENUMERATION OF CD4+
LYMPHOCYTES (AS AMENDED)

) **MAIL STOP: RCE**

) Group Art Unit: 1651

) Examiner: A. FORD

) Confirmation No.: 1340

**REQUEST FOR CONTINUED EXAMINATION
TRANSMITTAL LETTER**

MAIL STOP RCE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer Number **21839**

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☐ 395.00 ☒ 790.00 fee due under 37 C.F.R. § 1.17(e).

1. ☐ A. Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified in item 2 below.
- ☐ B. Applicant(s) previously submitted the following documents for which continued examination is requested:
 - ☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____.
 - ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.
 - ☐ Other: _____
2. The following documents are enclosed with this submission:
 - ☒ Amendment/Reply.
 - ☐ Affidavit(s)/Declaration(s).
 - ☐ Information Disclosure Statement.
 - ☐ A Petition for Extension of Time.
 - ☐ Other:
3. ☐ Small entity status is hereby claimed.

10/25/2006 AMONDAF1 00000107 10754711 790.00 OP
01 FC:1801

- ☒ No additional claim fee is required.
- ☐ The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

					FEES
Examination Fee (1801)					\$ 790.00
	No. of Claims		Extra Claims	Rate	
Total Claims	16	Minus 20=	0	x 50 (1202)	\$
Independent Claims	3	Minus 3=	0	x 200 (1201)	\$
If multiple dependent claims are presented, add \$ 360					\$
Total Fee					\$ 790.00
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Application Fee					\$
TOTAL FEE DUE					\$ 790.00


4. ☐ Charge _____ to Deposit Account No. **02-4800** for the fee due.
5. ☐ A check in the amount of _____ is enclosed for the fee due.
6. ☒ Charge \$790.00 to credit card for the fee due. Form PTO-2038 is attached.
7. ☐ Applicant(s) requests suspension of action by the Office until at least _____, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.
8. ☒ The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BUCHANAN INGERSOLL & ROONEY PC

Date: October 23, 2006

By:


Deborah H. Yellin
Registration No. 45,904

P.O. Box 1404
Alexandria, VA 22313-1404
703 836 6620